P99@@@8637

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	JATERSINE P	EASURES To prate name - must include suff	-02/26/99	888594 901083002 .50 *****78.50
		has hence mast include still	1X)	
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and a	check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
		ADDITIONAL COI		
	: AUDREY & Name (Pr	•		
Redrey of	5521- 154 GULFFART (City, S 121-8 Daytime Te	H JVE 5. ddress FL 33 State & Zip 20-0069 dephone number	70/)	FILED 99 FEB 26 AM II: 14 SECRETARY OF STATE
NOTE: Please provide the original and one copy of the articles.				
	·	Neu	> PROFI	+

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

FILED 99 FEB 26 AMII: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

WATERSIDE PLÉASURES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

418 BEACH DR NE ST. PETERSBURG FL 33701

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED SHARES (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

AUDREY E. NYGHARD 5521-15th Abe. 5.

ARTICLE V INCORPORATOR

GULFPORT

F

33707

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

AUDREY E.NYGAARIS 5521-154 AVE 5 GULSPOH FL-33701

2-24-99

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registed agent

Signature/Registered Agent

J-J4-95

Date